

County: Barron
 CUMBERLAND MEMORIAL HOSPITAL - ECU
 1110 7TH AVENUE

Facility ID: 2460

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CUMBERLAND 54829 Phone:(715) 822-6113
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? Yes
 Number of Beds Set Up and Staffed (12/31/02): 50
 Total Licensed Bed Capacity (12/31/02): 50
 Number of Residents on 12/31/02: 50

Ownership: Non-Profit Corporation
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? No
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 50

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		
Home Health Care	No					1 - 4 Years		26.0
Supp. Home Care-Personal Care	No					More Than 4 Years		52.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0			22.0
Day Services	No	Mental Illness (Org./Psy)	30.0	65 - 74	4.0			-----
Respite Care	No	Mental Illness (Other)	6.0	75 - 84	36.0			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	48.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	12.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	2.0		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	24.0	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	4.0		-----	RNs		14.9
Referral Service	No	Diabetes	4.0	Sex	%	LPNs		1.7
Other Services	No	Respiratory	0.0	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	28.0	Male	24.0	Aides, & Orderlies		
Mentally Ill	No		-----	Female	76.0	45.6		
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care		
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)
Level of Care																				
Int. Skilled Care	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Skilled Care	0	0.0	0	35	94.6	100	0	0.0	0	12	92.3	121	0	0.0	0	0	0.0	0	47	94.0
Intermediate	---	---	---	2	5.4	82	0	0.0	0	1	7.7	121	0	0.0	0	0	0.0	0	3	6.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		37	100.0		0	0.0		13	100.0		0	0.0		0	0.0		50	100.0

Admissions, Discharges, and Deaths During Reporting Period						Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02				

Percent Admissions from:						Activities of	%	% Needing Assistance of	% Totally	Total
						Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	10.5					Bathing	12.0	50.0	38.0	50
Private Home/With Home Health	0.0					Dressing	14.0	40.0	46.0	50
Other Nursing Homes	42.1					Transferring	38.0	54.0	8.0	50
Acute Care Hospitals	47.4					Toilet Use	26.0	38.0	36.0	50
Psych. Hosp.-MR/DD Facilities	0.0					Eating	80.0	12.0	8.0	50
Rehabilitation Hospitals	0.0					*****				
Other Locations	0.0					Continence		%	Special Treatments	%
Total Number of Admissions	19					Indwelling Or External Catheter		6.0	Receiving Respiratory Care	6.0
Percent Discharges To:						Occ/Freq. Incontinent of Bladder		62.0	Receiving Tracheostomy Care	0.0
Private Home/No Home Health	15.8					Occ/Freq. Incontinent of Bowel		30.0	Receiving Suctioning	0.0
Private Home/With Home Health	0.0					Mobility			Receiving Ostomy Care	4.0
Other Nursing Homes	5.3								Receiving Tube Feeding	2.0
Acute Care Hospitals	0.0					Physically Restrained		4.0	Receiving Mechanically Altered Diets	30.0
Psych. Hosp.-MR/DD Facilities	0.0					Skin Care			Other Resident Characteristics	
Rehabilitation Hospitals	0.0								Have Advance Directives	100.0
Other Locations	0.0					With Pressure Sores		2.0	Medications	
Deaths	78.9					With Rashes		10.0	Receiving Psychoactive Drugs	56.0
Total Number of Discharges										
(Including Deaths)	19									

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	99.0	87.4	1.13	85.1	1.16
Current Residents from In-County	88.0	84.3	1.04	76.6	1.15
Admissions from In-County, Still Residing	52.6	15.2	3.47	20.3	2.59
Admissions/Average Daily Census	38.0	213.3	0.18	133.4	0.28
Discharges/Average Daily Census	38.0	214.2	0.18	135.3	0.28
Discharges To Private Residence/Average Daily Census	6.0	112.9	0.05	56.6	0.11
Residents Receiving Skilled Care	94.0	91.1	1.03	86.3	1.09
Residents Aged 65 and Older	100.0	91.8	1.09	87.7	1.14
Title 19 (Medicaid) Funded Residents	74.0	65.1	1.14	67.5	1.10
Private Pay Funded Residents	26.0	22.6	1.15	21.0	1.24
Developmentally Disabled Residents	0.0	1.5	0.00	7.1	0.00
Mentally Ill Residents	36.0	31.3	1.15	33.3	1.08
General Medical Service Residents	28.0	21.8	1.29	20.5	1.37
Impaired ADL (Mean)*	47.2	48.9	0.96	49.3	0.96
Psychological Problems	56.0	51.6	1.08	54.0	1.04
Nursing Care Required (Mean)*	6.8	7.4	0.91	7.2	0.94